

Owner's Address

Owner's Name:

Homeowner Project Permit

Property must be owner occupied to qualify Inspection line: 614.334.2466 (call by 2pm for next business day inspection)
This form must be NOTARIZED

Owner's Phone:

Building Division, 3800 Municipal Way, Hilliard, OH 43026 614.334.2557

To qualify for the Homeowner Project Permit, the homeowner must perform all work without the use of a contractor to an owner-occupied single family residential property. Homeowner Projects are limited to the listing below. The City of Hilliard issues the Homeowner Project Permit at no charge and required Inspections are also included at no charge. The notarized Homeowners Statement is required to obtain this no charge permit. The Building Division provides Notary service at no charge.

Lot # / Subdivision:

	th of the following iten		o a ooparate pe	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.ppiioatioiii	1		
CHECK ITEM	TYPE OF PERMIT	FILE & COUNT AS	ATTACHMENT	s C	OTHER SPECIFICATIONS	INSPECTIONS	Routing	
_	Electrical	ELEC	(see chart)	Cno	oify oft.	(see chart) 6&7	4	
		MISC	a b a		cify sft:		#	
	Structures ≤ 200 sft		a,b,c	_	r 200 sft requires Bldg Permit	1, 3, 4, 5& 7		
	Fence	MISC			shed side faces out.		##	
	Basement Finish	BLDG	a,b,c		cify sft:	1, 3, 4, 5& 7	*	
	HVAC	HVAC	a	Spe	cify sft:	6&7	X	
	Deck ≤ 200 sft - no overhead structure	DECK	a,b,c	spe	cify deck height:	1, 3, 4 & 7	ж	
	Siding	MISC	a		NA	none	X	
	Roofing	MISC	a	Pict	ures in lieu of inpections accepted	1 & 6	\boxtimes	
	Private Driveway Expansion	MISC	a,b,c	Exp	ansion: width or length	1 & 2	\mathfrak{H}	
	Approach	MISC	a,b,c,g	if e	xact replacement a&g only	1,2 & 9	Å	
	Gas Line permit	MISC	a,c		NA	1,6 & 8	X	
	City Sidewalk	MISC	a & g	exa	ct replacement only	1,2 & 9	Å	
	Private Sidewalk	MISC	a,b,c	Onl	y required if 30" above grade	1 & 2	ж	
	Private Driveway other	MISC	a,b,c	Onl	y required if 30" above grade	1 & 2	ж	
	Remodel - Alteration	BLDG	a,b,c		cify sft:	1, 3, 4, 5& 7	ж	
	DEOLUDED ATTA	CHARNE						
REQUIRED ATTACHMENTS					REQUIRED INSPECTIONS (match to chart above)			
0	(match to chart a	above)			1 Plan Review	chart above)		
a b	this Permit Application	/drow. placem	cont) 1 for force		2 Pre-Pour Inspection			
С	Surveyor's Plot Plan. 3 copies (show/draw placement) 1 for fence Proposed drawing to scale. 3 copies (include Elec & HVAC)				3 Footer Inspection (before filling)			
d	Zoning Application				4 Framing Inspection			
-	Property Addresses w/I 200 ft (see FC Auditors site)				5 Mechanical Inspections (HVAC, Elec. permitted seperately)			
f	Letter specifying dates of use, size				6 Rough Install Inspection	rie, zieci perintuea seperatery,		
g	Right-of-Way Permit (Engineering Division)				7 Final Inspection			
	Indicate fence height 'Specific slat width "				8 Pressure Test			
h	Indicate fence type space b	etween the sla	ats"		9 Right-of-Way permit through	h Engineering required		
Possi	ble fence types: Privacy (PR), Boo	ard on Board	(BB), Shadow Box (SB)), Pickett	(PT), Split Rail (SR), Wrot Iron Sytl	e (W)		
n whole the second seco	nole or in part. I understand that I to be defective, I am responsi	at I, g all work fo tt I am respo ble for the c nd that if I u	or the above listed per consible for the constru- cost of any repairs or range the services of any	rmit with action an eplacem	am the owner and occupant of my own hands and will not use d inspection of all improvements ents necessary to bring the improtor, in whole or in part, my perm	s. If such improvements a	are oliance	
				44 bles	ase e-mail jamicon@hilliardohio.ç	gov if you have questions		
property owner's signature & date (identification required- sign in the presence of Notary)				Resolution	Route to: In-House / City Planner / ENG Route to: Code Enforcement Route to: ENG for ROW sign-off Send letter Adjust Toole worksheet			
	signature of Notary			፟				
	NOTARY STAMP RE	QUIRED		_	Permit granted by: (become	s permit with valid signature	e)	
Note	e: conditions of approval i	f item che	ck below	1.201				
	Fences are required to be 6" above grade at the center of any drainage swale.			effective date: 07.01.201	Authorized Signature / City of Hilliard Date			
	Contact Ohio Utilities Prot have utilities mark			Pel Pel	rmit # assigned: OFFICE REQUIRES NULL RECEIPT Inspection	on Line: 614.334.2466		